Practicioner's Docket No. 51066

PATENT

(Amendment Transmittal—page 1 of 4)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re a	pplication	on of:	Cameron et al.					
Serial No.: 10/982,767					Group No.:			
Filed:					Examiner:		RECEIVED	
			SYSTEMS F	OR SHORT WAVELEN	GTH	MAY 2 6 2004 TC 1700		
P.O. E	nissione Box 1450 ndria, V	0	atents 13-1450			-		
			AMENDMEN	T TRANSMI	TTAL			
1.	Transm	itted her	rewith is an amendment for	this application	on.			
			S	TATUS				
2.	Applica [] [X]	a small [] []	entity. A statement: is attached. was already filed. an a small entity. EXTENS	ION OF TER	M			
NOTE:								
			CERTIFICATE OF MAILING	G/TRANSMISSI	ON (37 C.F.R. 1.8(a))			
I hereby	certify tha	it, on the o	date shown below, this correspon	ndence is being:				
		MA	ILING		FACSIMILE			
[X]	with suff envelope	icient pos addresse P.O. Box	United States Postal Service tage as first class mail in an d to the Commissioner for 1450, Alexandria, Virginia	Signatu	transmitted by facsimile to the P Trademark Office.	Patent ar	nd	
Date:	5/17/0	4		(type or	Deanna M. Rivernider print name of person certifying)		<u> </u>	

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 C.F.R. 1.645 for extensions of time in interference proceedings, and 37 C.F.R. 1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

(a) [] Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
[]	one month two months	\$110.00 \$420.00	\$55.00 \$210.00
[]	three months	\$950.00	\$475.00
[]	four months	\$1,480.00	\$1,005.00

Fee: \$_____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

[]		been secured. The fee paid therefor of the due for the total months of extension now
	Extension fee due with this request	\$

OR

(b) [X] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

						OTHER THAN A			
(Col.1	l)	(Col. 2) (Col. 3) SMALL ENTITY			SMALL ENTITY				
C	laims								
Ren	nainin	g	Highest No.						
A	After		Previously	Present		Addit.			Addit.
Ame	ndme	nt	Paid For	Extra	Rate	Fee	OR	Rate	Fee
Ÿ	*	Minus	**	=	x \$9 =	\$		x \$18 =	\$
	*	Minus	***	= 0	x \$39 =	\$		x \$78 =	\$ 0
rst Pres	entatio	on of Mul	tiple Depender	nt Claim	+ \$130 =	\$		+ \$260 =	\$ 0
					Total		OR	Total	
					Addit. Fee	\$		Addit. Fee	\$
							".		
							d in the	annronriate hov	in Col. 1
						uniber tour	u iii tiic	appropriate oox	iii Coi. i
р									
NG:									g with any
requirement of form which has been made." 37 C.F.R. 1.116(a) (emphasis added).									
(complete (c) or (d), as applicable)									
(c) [X] No additional fee for claims is required									
(-)	[]								
OR									
(d)	[]	Total	l additional fee	for claim	s required \$ _		<u>.</u>		
FEE PAYMENT									
5. [] Attached is a check in the sum of \$						•			
[]	Att	ached is a	check in the s	um of \$					
[]			check in the sunt No.		<u>.</u>		<u>.</u>		
	If the earlier of the "Fa prior a Proof of the	After Amendme * * * * * * * * * * * * *	Claims Remaining After Amendment * Minus * Minus rst Presentation of Mul If the entry in Col. 1 is les If the "Highest No. Previous If the "Highest No. Previous The "Highest No. Previous a prior amendment or the management of form ING: "After final reject requirement of form (c) [X] No a	Claims Remaining Highest No. After Previously Amendment Paid For * Minus ** * Minus *** Test Presentation of Multiple Dependent If the entry in Col. 1 is less than the entry in If the "Highest No. Previously Paid For" IN The "Highest No. Previously Paid For" IN The "Highest No. Previously Paid For" (To a prior amendment or the number of claims of the image of the	Claims Remaining Highest No. After Previously Present Amendment Paid For Extra * Minus ** = * Minus *** = 0 rest Presentation of Multiple Dependent Claim If the entry in Col. 1 is less than the entry in Col. 2, wri If the "Highest No. Previously Paid For" IN THIS SPAI If the "Highest No. Previously Paid For" (Total or Indep. To a prior amendment or the number of claims originally fil ING: "After final rejection or action (§ 1.113) amerequirement of form which has been made." 3 (complete (c) or (d) (c) [X] No additional fee for claims in Old (d) [] Total additional fee for claims in Old (d) [] Total additional fee for claims in Old (d) [] Total additional fee for claims in Old (e) [] Total additional fee for claims in Old (f) [] Total additional fee for claims in Old (e) [] Total additional fee for claims in Old (f) [] Total additional fee for Claims in Old (f) [] Total additional fee for Claims in Old (f) [] Total additional fee for Claims in Old (f)	Claims Remaining Highest No. After Previously Present Amendment Paid For Extra Rate * Minus ** = x \$9 = * Minus *** = 0 x \$39 = rst Presentation of Multiple Dependent Claim +\$130 = Total Addit. Fee If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3, If the "Highest No. Previously Paid For" IN THIS SPACE is less than 2 If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3 The "Highest No. Previously Paid For" (Total or Indep.) is the highest of a prior amendment or the number of claims originally filed. **Monument of form which has been made." 37 C.F.R. 1.116(a) **Complete (c) or (d), as applicated to the complete of the complete	Claims Remaining Highest No. After Previously Present Addit. Amendment Paid For Extra Rate Fee * Minus ** = x \$9 = \$ * Minus *** = 0 x \$39 = \$ rest Presentation of Multiple Dependent Claim + \$130 = \$ Total Addit. Fee \$ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3, If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20 If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Indep.) is the highest number foun a prior amendment or the number of claims originally filed. **MINUS ** = x \$9 = \$ **Total Addit. Fee \$ Total Addit. Fee \$ **Intervention of Multiple Dependent Claim	Claims Remaining Highest No. After Previously Present Addit. Amendment Paid For Extra Rate Fee OR * Minus ** = x \$9 = \$ * Minus *** = 0 x \$39 = \$ * Minus *** = 0 x \$39 = \$ * Strest Presentation of Multiple Dependent Claim + \$130 = \$ Total OR Addit. Fee \$	Claims Remaining After Previously Present Addit. Amendment Paid For Extra Rate * Minus ** = x \$9 = \$ x \$18 = * Minus *** = 0 x \$39 = \$ x \$78 = rst Presentation of Multiple Dependent Claim Addit. Fee Total Addit. Fee Total Addit. Fee * Minus *** = 0 x \$39 = \$ x \$78 = rst Presentation of Multiple Dependent Claim Addit. Fee * Minus *** = 0 x \$39 = \$ x \$78 = rst Previously Paid For IN THIS SPACE is less than 20, enter "20". If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box or a prior amendment or the number of claims originally filed. **NG: **After final rejection or action (\$ 1.113) amendments may be made canceling claims or complying requirement of form which has been made." 37 C.F.R. 1.116(a) (emphasis added). **Complete (c) or (d), as applicable) **OR **OR **Total additional fee for claims required \$ **OR

FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

о.	[A]	if any additional extension and/or fee i	s required, charge Account No	04-1105.				
	AND/OR							
	[X] If any additional fee for claims is required, charge Account No							
			M					
			SIGNATURE OF PRACTITIONE	R				
Reg. No. 33,860			Peter F. Corless					
			(type or print name of practitioner) EDWARDS & ANGELL, LLF)				
Tel. No. (617) 439-4444			P.O. Box 55874 P.O. Address					
			Boston, Massachusetts 02205					





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

Cameron et al.

SERIAL NO.

10/082,767

GROUP:

1752

FILED:

February 25, 2002

EXAMINER: R. Ashton

FOR:

PHOTOACID GENERATOR SYSTEMS FOR SHORT WAVELENGTH

IMAGING

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Applicants are in receipt of the Office Action dated March 30, 2004 of the above-identified application. Please amend the application as follows.

A listing of pending claims begins on page 2 of this paper.

Remarks begin on page 6 of this paper.